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Bib Data Sheet

CONFIRMATION NO. 3708

SERIAL NUMBER 09/691,782	FILING DATE 10/19/2000 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. 760-3 RES
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APPLICANTS

Scott R. Smith, Chaska, MN;
David Sogard, Edina, MN;
Susan Shoemaker, Elk River, MN;

**** CONTINUING DATA *******

THIS APPLICATION IS A REI OF 08/720,091 09/27/1996 PAT 5,824,046

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE
GRANTED ** 11/29/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MN	SHEETS DRAWING 7	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

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TITLE

Covered stent

FILING FEE RECEIVED 938	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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